

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	Bm		06-06-01
FORMALITY REVIEW	Zm	927	08/02/01
RESPONSE FORMALITY REVIEW	SL	809	10-31-01
	KL	1050	3-7-02

INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
Final Original	
1	10/17/02
2	11/12/03
3	11/12/03
4	11/12/03
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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12/15/02  
 12/15/02  
 12/15/02